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## NREMT Emergency Medical Technicians Exam Sample Questions (Q56-Q61):

### NEW QUESTION # 56

A 27-year-old patient reports trouble breathing after being struck by a car. Which of the following findings are indicative of a possible chest wall injury? Select the three answer options that are correct.

- A. Occipital depression
- B. **Unequal rise and fall**
- C. Jugular vein distention
- D. Epigastric distension
- E. **Clavicle deformity**
- F. Subcutaneous emphysema

**Answer: B,E,F**

Explanation:

Comprehensive and Detailed Explanation From Exact Extract:

Clavicle deformity suggests potential rib or thoracic trauma. Unequal chest rise may indicate a flail segment, pneumothorax, or hemothorax. Subcutaneous emphysema, the presence of air under the skin, is a classic finding in pneumothorax or tracheobronchial injury.

Occipital depression is not chest related; epigastric distension is a GI symptom; and jugular vein distention would suggest tension pneumothorax or cardiac tamponade, which are more advanced complications.

References:

NREMT Trauma Assessment Guidelines

National EMS Education Standards - Chest Injuries

AAOS Emergency Care and Transportation (11th ed.), Chapter: Chest and Abdominal Trauma

**NEW QUESTION # 57**

When using the SALT method for triage, which of the following interventions should the EMT perform during the individual assessment step?

- A. Insertion of airway adjuncts, bleeding control, and moving patients to the triage area
- B. Bleeding control, opening the airway, and administering two rescue breaths for pediatric patients
- **C. Assessing respirations, administering two rescue breaths, and assessing patient mentation**
- D. Completing first responder scorecards to track patients

**Answer: C**

Explanation:

Comprehensive and Detailed Explanation From Exact Extract:

SALT(Sort, Assess, Lifesaving interventions, Treatment/Transport) is a mass casualty triage method recommended by the CDC and the National Association of EMS Physicians (NAEMSP). During the

"Assess" step, responders:

\* Check respirations

\* Provide lifesaving interventions such as rescue breaths if the patient is not breathing but has a pulse

\* Evaluate mentation (e.g., ability to follow commands)

Airway adjuncts and full transport do not happen at this stage. Scorecards and pediatric-specific modifications are addressed later in the protocol.

References:

NREMT EMS Operations - Mass Casualty and Triage Guidelines

CDC SALT Mass Casualty Triage Guidelines

National EMS Education Standards - Disaster Response

**NEW QUESTION # 58**

Heat exhaustion is most frequently associated with

- A. Bradycardia
- **B. Hypovolemia**
- C. Altered mental status
- D. Hypertension

**Answer: B**

Explanation:

Comprehensive and Detailed Explanation From Exact Extract:

Heat exhaustion results from prolonged exposure to elevated temperatures, leading to fluid and electrolyte loss (especially sodium and water), causing hypovolemia. This can result in:

\* Tachycardia

\* Weakness

\* Dizziness

\* Profuse sweating

Unlike heat stroke, mental status is typically preserved in heat exhaustion. Hypertension and bradycardia are not characteristic.

References:

NREMT Environmental Emergencies Module  
National EMS Education Standards - Heat-Related Illnesses  
AAOS Emergency Care (11th ed.), Chapter: Environmental Emergencies

**NEW QUESTION # 59**

A patient has facial drooping, left side paralysis, and slurred speech. The vital signs are BP 160/100, P 100, R 20, and SpO<sub>2</sub> 96% on room air. Which of the following interventions is appropriate for this patient?

- A. Avoid asking the patient questions due to dysphasia
- B. Place the patient in a supine position
- C. Administer oxygen at 12 LPM
- D. Protect the left arm during transport

**Answer: D**

Explanation:

Comprehensive and Detailed Explanation From Exact Extract:

The patient's symptoms are consistent with a stroke (CVA). Proper prehospital care focuses on maintaining airway, breathing, circulation, and protecting the affected limbs. Positioning the patient with head elevated (not supine) reduces intracranial pressure and aspiration risk.

Protecting the paralyzed side (e.g., left arm) from injury during transport is critical. EMS should still communicate with the patient - even if speech is impaired - and perform a stroke assessment using tools like Cincinnati Prehospital Stroke Scale (CPSS) or FAST.

References:

NREMT Medical Emergencies: Neurological Conditions

AHA Stroke Guidelines - Prehospital Management

National EMS Education Standards - Stroke Assessment Protocols

**NEW QUESTION # 60**

A patient is having an asthmatic attack. The EMT receives orders from medical control to assist with the patient's inhaler. What are the expected side effects of this medication? Select the three correct options.

- A. Tachycardia
- B. Confusion
- C. Coughing
- D. Drowsiness
- E. Hypotension
- F. Nervousness

**Answer: A,C,F**

Explanation:

Comprehensive and Detailed Explanation From Exact Extract:

Albuterol, a common beta-2 adrenergic agonist used in inhalers, stimulates bronchial smooth muscle relaxation. However, stimulation of beta receptors can also produce systemic effects such as:

\* Tachycardia (due to beta-1 cross-reactivity)

\* Nervousness (from central stimulation)

\* Coughing (a local airway response)

Confusion and drowsiness are not typical side effects of beta-agonists. Hypotension is rare unless severe overdose occurs.

References:

NREMT Scope of Practice Model - Medication Administration

American Heart Association BLS and ACLS Drug List

"Emergency Care and Transportation of the Sick and Injured" (AAOS, 11th ed.), Chapter on Respiratory Emergencies

**NEW QUESTION # 61**

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